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Al	RIZONA STATE BOARD OF HEALTH BUREAU OF VITAL STATISTICS	State File No. 332
Mariopa	STANDARD CERTIFICATE OF BIRTH	Registered No. J. 3.9.9
District of Portuguis		
City & Morning		
2. Full name of child Usea.	If heth courred in pospital or institution, giv	e its NAME instead of street and number) { If child is not yet named, make
3. See of Child To be answered ONLY in event of plural births.	f I de la complet or agner 6. Legitimate?	7. Date of bir 19/27
8. Full name O. L. FATHER	yle 14. Full maiden name 30	MOTHER Marble
9. Residence (Usual place of abode) 57	N./O Raw 15. Residence (Usual place of abode If non-resident, give place of abode If non-resident is not about the non-resident is non-resident is non-resident in the non-resident in the non-resident is non-resident in the non-resident in the non-resident is non-resident in the non-resident in the non-resident in the non-resident is non-resident in the non-resid	5094. 10 d ave
10. Color or Late 11. Age at last	16. Color or rece	10
12. Birthplace (city or place)	18. Birthplace (city or state	17. Age at last birthday (O (Years)
13. Occupation Nature of industry	(State or country) 19. Occupation Nature of industry	ansellife
20. Number of children of this mother	(a) Born alive and now living 2 (b) Born alive but now dead (c) Stillborn	1. Were precautions taken against oph- thalmin neonatorum.
CER I hereby certify that I attended the birth of the	TIFICATE OF ATTENDING DUBICAN OR MIDWIFE	
* When there was no attending physician or midwife, then the father, householder, etc. should make the	Signature(Bort all the stillbort)	m. on the date above stated.
chia is one that neither breathes nor shows other evidence of life after birth. Given name added from t supplemental report	Thou	(Physicker or goldwife).
Month, day, Registrar.	year Piled //- 22, 1927	
1.15- 11/9	7-745	Registrar,

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